

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758659

Entity Name: SHADOW WOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O BENCHMARK PROP. MGT.
7932 WILES RD
CORAL SPRINGS, FL 33067

Current Mailing Address:

C/O BENCHMARK PROP. MGT.
7932 WILES RD
CORAL SPRINGS, FL 33067

FEI Number: 65-0030655

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAYE BENDER REMBAUM
1200 PARK CENTRAL BLVD. SOUTH
POMPANO BEACH, FL 33064 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name HEWITT, SUSAN
Address 8500 SHADOW COURT
City-State-Zip: CORAL SPRINGS FL 33071

Title D
Name JUST, CHESTER
Address 8501 SHADOW CT.
City-State-Zip: CORAL SPRINGS FL 33071

Title T
Name HAWKINS, JANE
Address 8559 SHADOW COURT
City-State-Zip: CORAL SPRINGS FL 33071

Title VP
Name CESAR, MARGARETTE
Address 8471 SHADOW COURT
City-State-Zip: CORAL SPRINGS FL 33071

Title S
Name LYTTLE, KAREN
Address 8427 SHADOW COURT
City-State-Zip: CORAL SPRINGS FL 33071

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN HEWITT

P

03/23/2021

Electronic Signature of Signing Officer/Director Detail

Date